

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY
ARTESIA, OFFICE

SUBMIT IN DUPLICATE*

(See other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R355.5.

5. LEASE DESIGNATION AND SERIAL NO.

NM 2084

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Richardson Oils-Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

West Henshaw Grayburg

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA

4 - 16S - 30E

12. COUNTY OR PARISH

Eddy

13. STATE

NM

1a. TYPE OF WELL:

OIL WELL ☐ GAS WELL ☒ DRY ☐ Other

b. TYPE OF COMPLETION:

NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other

2. NAME OF OPERATOR

Roy E. Kinsey

3. ADDRESS OF OPERATOR

Box 953, Midland, Texas

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)

At surface 330 EL & 2337 NL Sec 4

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

ARTESIA, OFFICE

9/10/68

15. DATE SPUDDED

9/10/68

16. DATE T.D. REACHED

9/17/68

17. DATE COMPL. (Ready to prod.)

10/21/68

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

3845 CR

19. ELEV. CASINGHEAD

3847

20. TOTAL DEPTH, MD & TVD

2858

21. PLUG, BACK T.D., MD & TVD

22. IF MULTIPLE COMPL., HOW MANY*

23. INTERVALS DRILLED BY

ROTARY TOOLS

CABLE TOOLS

0 - 2858

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD & TVD)

2760 - 2770 premier

25. WAS DIRECTIONAL SURVEY MADE

26. TYPE ELECTRIC AND OTHER LOGS RUN

Gamma Ray

27. WAS WELL CORED

28. CASING RECORD (Record casing set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	PIPE SIZE	CEMENTING RECORD	AMOUNT PULLED
8 5/8	24	419	12 1/4	100	none
4 1/2	9.5	2858	7 7/8	150	"

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 3/8	2730	

31. PERFORATION RECORD (Interval, size and number)

2760 - 2770

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
2760 - 2770	frac 12,000 gal oil & 18000# sand & 250 gal acid

33.* PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)					WELL STATUS (Producing or shut-in)	
10/21/68		Flowing						
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO	
10/21/68	3.5	25/64	→		1086	0	→	
FLOW, TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)		
230	unknown	→		1086	0			

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

sold to Phillips Petroleum Co.

TEST WITNESSED BY

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

Agent

DATE

11/6/68

*(See Instructions and Spaces for Additional Data on Reverse Side)

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

Items 22 and 24: If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

37. SUMMARY OF POROUS ZONES:			38. GEOLOGIC MARKERS		
SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES			NAME	MEAS. DEPTH	TRUE VERT. DEPTH
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.		
	0	40	Tansill	1096	
	40	175	Yates	1290	
	175	290	Seven Rivers	1448	
	290	410	Queen	2047	
	410	715	Grayburg	2440	
	715	1270	Premier	2760	
	1270	1735	San Andres	2780	
	1735	1942			
	1942	2118			
	2118	2140			
	2140	2210			
	2210	2275			
	2275	2750			
	2750	2770			
	2770	2858			